

mutation into a cheesy or cretaceous matter, composed of the carbonate and phosphate of lime,—salts which have never been detected in coagulable lymph. Now, in opposition to his hypothesis, it may be urged, that both the phosphate and carbonate of lime exist in the blood, and unless the clearest evidence be adduced to prove that tubercle is not secreted by the blood, the presence of these salts in that morbid product can no longer be a matter of surprise. Let us suppose, for the sake of argument, that these salts cannot be discovered by analysis in the blood, are we to conclude that their deposition from that fluid is impossible? We know that urea, under ordinary circumstances, cannot, even by the most careful analysis, be detected in the blood; yet, after extirpation of the kidneys, it has been found in that fluid, in appreciable quantity. I feel but little hesitation in expressing my belief, that all the morbid productions are elaborated in and deposited by the blood in the various textures of the body. The several varieties of carcinoma, encephaloid disease, fungus hæmatodes, melanosis, have been discovered in the blood by Andral, Beclard, Velpeau, Langstaff, and others. Tubercle has been found not only in the blood, but also included in coagulable lymph, separated from the blood. Dr. Armstrong had in his possession some preparations, in which tubercles were seen to hang from the arterial capillaries, like bunches of grapes from the shoots of a vine-branch. These are all most important facts, and tend to corroborate the opinion entertained by many eminent pathologists, that these morbid matters are secreted by the blood. Inflammation alone can never, I feel convinced, be a cause of their formation. There must be an alteration in the qualities of the blood, and “a perversion of nutrition,” which favour the development of these accidental productions.

CASE OF  
MALIGNANT DISEASE OF THE TESTIS,  
IN A CHILD.

To the Editor of THE LANCET.

SIR:—THE LANCET of Dec. 12, 1835, records two cases of diseased testicle, treated by Mr. Langstaff. I knew that gentleman when I was a pupil at *St. Bartholomew's Hospital*, and I naturally felt somewhat interested in reading his paper, since a case of a similar character has fallen under my own care, which I beg leave to send for a place in THE LANCET. I am, Sir, yours, &c.

B. W. BROWN.

Wimeswold, Leicestershire,  
Jan. 1837.

About ten months ago a very stout, healthy-looking boy, two years and a half old, was brought to me by his mother, with a considerable enlargement of the left scrotum. A little fulness was observed in the part, when the child was rather more than a year old, but, as he never complained of any pain, appeared to be well in health, and played daily among other children, his parents did not think at all seriously of the case until last January, when the boy spoke of great pain in the part, which had by this time increased to nearly the size of a goose's egg. It was bright, and of a somewhat purple, or dark reddish, colour, on which were seen several dark-coloured veins. I examined the part very minutely, but was somewhat at a loss to ascertain the true character of the disease in one so young. The tumour presented considerable elasticity to the touch, in every part, but there was no transparency, and, therefore, I could not think the case to be one of hydrocele, unless there existed a morbid thickening of the tunica vaginalis. The cord was not affected. From the want of transparency, the weight of the tumour, and the want of the peculiar sensation to the touch in hydrocele, I concluded there was a disease of the body of the testicle, and was induced to try what palliative means might do, and as the boy was suffering apparently from great pain in the part, and the vessels were so distended, I directed the application of six leeches, warm fomentations, and the use of a suspensory bandage; at the same time he was ordered to take small doses of calomel, *pro tempore*, and an occasional opiate. This treatment afforded considerable relief; but, in a short time, the boy's appetite began to fail; the pain at intervals was violent, and the enlargement increased, and was of a darker colour. As the health was declining fast, I now proposed the immediate removal of the testis, as the only chance of doing the boy any good. At this, however, his parents hesitated, without first having another opinion, which was obtained. One said, that “he thought there was a fluid in the upper part of the tumour;” and another pronounced the case to be one of “chronic inflammation of the testis, or its coats.” As I did not coincide with either opinion, I wished Mr. A. Henburrow, of Nottingham, surgeon to the hospital, to see the boy. Mr. H. said the operation of removal ought to be performed without delay, there being a disease of the gland itself. He added, that there was no other chance of saving the boy's life, though that chance was a bad one, for it was very probable that the disease would make for the spine, or some other part, sooner or later. The parents, however, were averse from the operation for more than three weeks afterwards, but the poor boy's sufferings continuing to increase, (for by this time there was paralysis of the lower

limbs), they consented. Dr. Sanderson, of Nottingham, being on a visit with me, kindly offered to assist me in the operation.

I made an incision nearly the whole length of the tumour, or down to the bottom of the scrotum, and removed the diseased part, which weighed nearly three ounces. The ligatures came away in due time, the wound healed in about eighteen days; and since the operation the boy had been free from pain, and slept soundly. In about ten or twelve weeks, however, after the removal of the part, the spine became considerably distorted, forming quite a curve, and the abdomen very greatly enlarged, the fæces and urine being voided involuntarily. The boy died fifteen weeks after the operation. I was not permitted to examine the body after death, or it is very probable that I should have found similar appearances to those so ably described by Mr. Langstaff in his cases.

In the examination of the removed part, there was found a very considerable thickening of the tunica vaginalis and albuginea; and on dividing the gland itself, and rubbing the finger over the divided surfaces, a quantity of whitish fluid escaped, of a tenacious character, and in the gland itself, the structure of which was destroyed, might be seen several dense yellowish masses, running into each other, with patches (lobules) of a bluish or semi-transparent appearance, in several parts, of about the size of peas, some larger. At the lower and anterior part there was a mass of a dark reddish and purple character. I have preserved the part in spirits.

\*\* With the foregoing communication Mr. Brown forwarded to us a coloured drawing of the tumour (of the full size), taken immediately before the operation, and a coloured sketch, representing a section of the testicle immediately after, in the latter of which the thickening of the coats, and the internal appearance of the gland, are shown. As we cannot very well give wood engravings of the parts, the drawings shall be left with the publisher, at THE LANCET Office, for the examination of any gentleman who may be desirous of inspecting them.—  
ED. L.

## OIL OF TURPENTINE IN TETANUS.

DR. PEACOCK'S THIRD CASE.

To the Editor of THE LANCET.

SIR:—I have the pleasure of sending you a *third* case in proof of the utility of turpentine in tetanus, and I trust that some of the hospital surgeons will take the first opportunity of putting the remedy to the test in

that disease. For the purpose of seeing our way distinctly I took care that no other means should be employed at the same time, and as the patient was an adult, the proper dose will be more readily ascertained.

An unmarried lady, residing near Darlington, turned of 40 years of age, in assisting to spit a piece of beef wounded her thumb with a sharp bone, which caused her a great deal of pain, which she endeavoured to assuage by poultices, but in vain, and not understanding the cause of her suffering she did not apply for assistance until I was by accident thrown in her way, when she told me that she not only had a lame thumb, but that the whole arm was painfully stiff and rigid, and she could not raise it to her head. The severe symptoms were just taking possession. She complained of having a very bad cold, which affected with pain and stiffness her head, neck, and collar-bone, and she had frequent shootings through her chest, and with them, painful catchings throughout the whole frame. Her back-bone was painfully rigid, and the severest pain was gradually extending itself downwards. Her jaw and throat were dry and painful, but did not prevent her from getting down a trifling morsel of food. I was obliged to declare what was the cause of her sufferings, but of this I immediately repented, for I did not know that she had lately seen in the Museum at Edinburgh a painting of a man in the last stage of opisthotonos. I need not say that the information gave her a terrible shock. Sixteen drops of the turpentine were given as soon as possible, with directions that it should be repeated every five or six hours. She did not like the medicine, as it made her a little sick, but she obeyed her directions religiously, and on the next day she confessed that the painful rigidity of her whole frame was somewhat relaxed. I told her to persevere, and that in another twenty-four hours she would be melted down like snow on a summer's day, which was actually the case.

Considering the little I have seen of this complaint, I have acquired a complete confidence in the remedy; but I should say that during the third night the medicine had a troublesome effect upon the bladder. My patient told me, however, that if it was only occasioned by the medicine, she would bear it cheerfully, as she improved every hour in the tetanic affection. This will put the readers of THE LANCET in mind of what Mr. Liston told them some time ago, of the practice of some of the Indian tribes, of wounding the neck of the bladder in tetanus.

We found the bowels readily acted upon by a couple of pills, first prescribed, I think, by Dr. Elliotson, composed of colocynth and aloes, and quickened by croton oil. Dr. Mason Good seems, in my opinion, to labour under a great mistake when he cautions the